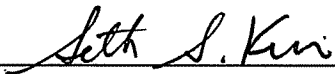


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------|--------------|-----------------------|------------------|-------------------|--|---------------------|--------|----------------------|--------------------------|
| <b>REPLY/AMENDMENT<br/>FEE TRANSMITTAL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                  | Attorney Docket No.                                                                 |              | 1293.1970             |                  |                   |  |                     |        |                      |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | Application Number                                                                  |              | 10/716,868            |                  |                   |  |                     |        |                      |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | Filing Date                                                                         |              | November 20, 2003     |                  |                   |  |                     |        |                      |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | First Named Inventor                                                                |              | Hyun-Kwon CHUNG et al |                  |                   |  |                     |        |                      |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | Group Art Unit                                                                      |              | 2178                  |                  |                   |  |                     |        |                      |                          |
| AMOUNT ENCLOSED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | \$ 540.00                                                                           |              | Examiner Name         |                  | Manglesh M. Patel |  |                     |        |                      |                          |
| <b>FEE CALCULATION (fees effective 10/02/08)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| CLAIMS AS AMENDED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Claims Remaining After Amendment | Highest Number Previously Paid For                                                  | Number Extra | Rate                  | Calculations     |                   |  |                     |        |                      |                          |
| TOTAL CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 21                               | - 25 =                                                                              | 0            | X \$52.00 =           | \$ 0.00          |                   |  |                     |        |                      |                          |
| INDEPENDENT CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 4                                | - 4 =                                                                               | 0            | X \$220.00 =          | \$ 0.00          |                   |  |                     |        |                      |                          |
| Since an Official Action set an <u>original</u> due date of <u>November 6, 2008</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$130)); (2 months (\$490)); (3 months (\$1,110)); (4 months (\$1,730)); (5 months (\$2,350)):                                                                                                                                                                                                                                              |                                  |                                                                                     |              |                       | \$               |                   |  |                     |        |                      |                          |
| If Notice of Appeal is enclosed, add (\$540.00)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  |                                                                                     |              |                       | \$ 540.00        |                   |  |                     |        |                      |                          |
| If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$140.00)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                                                                     |              |                       | \$               |                   |  |                     |        |                      |                          |
| Information Disclosure Statement (Rule 1.17(p)) (\$180.00)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                  |                                                                                     |              |                       | \$               |                   |  |                     |        |                      |                          |
| Total of above Calculations =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                     |              |                       | \$ 540.00        |                   |  |                     |        |                      |                          |
| Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |                                                                                     |              |                       | \$               |                   |  |                     |        |                      |                          |
| <b>TOTAL FEES DUE =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                  |                                                                                     |              |                       | <b>\$ 540.00</b> |                   |  |                     |        |                      |                          |
| <small>(1) If entry (1) is less than entry (2), entry (3) is "0".<br/> (2) If entry (2) is less than 20, change entry (2) to "20".<br/> (4) If entry (4) is less than entry (5), entry (6) is "0".<br/> (5) If entry (5) is less than 3, change entry (5) to "3".</small>                                                                                                                                                                                                                                                                                          |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| <b>METHOD OF PAYMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| <input type="checkbox"/> Check enclosed as payment. <input checked="" type="checkbox"/> Credit Card Payment Form, Form PTO-2038(attached).<br><input type="checkbox"/> Charge "TOTAL FEES DUE" to the Deposit Account No. below.<br><input type="checkbox"/> No payment is enclosed and no charges to the Deposit Account are authorized at this time (unless specifically required to obtain a filing date).                                                                                                                                                      |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| <b>GENERAL AUTHORIZATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| <input checked="" type="checkbox"/> If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: <div style="margin-left: 100px;"> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Deposit Account No.</td> <td style="padding: 2px;">503333</td> </tr> <tr> <td style="padding: 2px;">Deposit Account Name</td> <td style="padding: 2px;">STEIN, MCEWEN &amp; BUI, LLP</td> </tr> </table> </div> |                                  |                                                                                     |              |                       |                  |                   |  | Deposit Account No. | 503333 | Deposit Account Name | STEIN, MCEWEN & BUI, LLP |
| Deposit Account No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 503333                           |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| Deposit Account Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STEIN, MCEWEN & BUI, LLP         |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| <input checked="" type="checkbox"/> The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.                                |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| SUBMITTED BY: STEIN, MCEWEN & BUI, LLP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  |                                                                                     |              |                       |                  |                   |  |                     |        |                      |                          |
| Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                  | Seth S. Kim                                                                         |              | Reg. No.              |                  | 54,577            |  |                     |        |                      |                          |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                  |  |              | Date                  |                  | 11/6/2008         |  |                     |        |                      |                          |